## This Form is for INTERNAL PTO USE ONL It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) D (CALCULATION SHEET)

APPLICATION NUMBER: 0975 9377

Less Filing Fees Submitted

BALANCE DUE

	Total ree Calculation					
• •	Fee Code	Total # Claims	Number Extra	. <b>x</b>	Fce	Fee
	Sm./Lg.		•	•	Sm. Entity	Lg. Enti
Basic Filing Fee	201/101			•		710.00
Total Claims >20	203/103	-20		x	<del></del>	
Independent Claims >3	202/102	-3-	·	x		•
Mult. Dep Claim Present	204/104	.· ·				130,00
Surcharge ·	205/105		.•			
English Translation	139	•				
TOTAL FEE CALCULA	TION					
Fees due upon filing th	e application:					•
Total Filing Fees Due	= \$	8400	0			•

·s\_ 840.00